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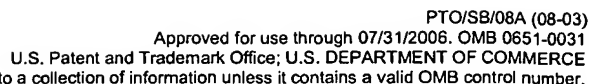
TRANSMITTAL FORM	
(to be used for all correspondence after initial filing)	
Application Number	10/636,152
Filing Date	August 7, 2003
First Named Inventor	Venkatesan
Art Unit	
Examiner Name	
Attorney Docket Number	FC-120
Total Number of Pages in This Submission	

ENCLOSURES (Check all that apply)		
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<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	6,620,539 B1; 6,447,942 B1
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<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Frederick W. Mau II	
Signature		
Date	October 17, 2003	

CERTIFICATE OF TRANSMISSION/MAILING			
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Complete if Known

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Sheet	1	of	1
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[illegible][illegible]

**Examiner
Signature**

Date
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